

BEFORE THE  
PHYSICIAN ASSISTANT BOARD  
MEDICAL BOARD OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

Bruce Harry Garbett, P.A.  
2231 Pacific Ave., B-2  
Costa Mesa, CA 92627

Physician Assistant  
Certificate No. PA 11636

Case No. 950-2015-000580

AGREEMENT FOR  
SURRENDER OF LICENSE

Respondent.

TO ALL PARTIES:

IT IS HEREBY STIPULATED AND AGREED by and between the parties to the  
above-entitled proceedings, that the following matters are true:

1. Complainant, Maureen L. Forsyth, is the Executive Officer of the Physician Assistant Board of California, Department of Consumer Affairs ("Board").
2. Bruce Harry Garbett, P.A., ("Respondent") has carefully read and fully understands the effect of this Agreement.
3. Respondent understands that by signing this Agreement he is enabling the Board to issue this order accepting the surrender of license without further process. Respondent understands and agrees that Board staff and counsel for complainant may communicate directly with the Board regarding this Agreement, without notice to or participation by Respondent. The Board will not be disqualified from further action in this matter by virtue of its consideration of this Agreement.

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1           4.     Respondent acknowledges that on June 1, 2017, a Decision was rendered  
2 wherein he was issued a license on a probationary basis for a period of 5 years with various  
3 standard terms and conditions.

4           5.     Upon acceptance of the Agreement by the Board, Respondent understands  
5 he will no longer be permitted to practice as a physician assistant in California, and  
6 also agrees to surrender his wallet certificate, wall license and D.E.A. Certificate(s).

7           6.     Respondent understands that he may not petition for reinstatement as a  
8 Physician Assistant for at least three (3) years from the effective date of his  
9 surrender. Respondent fully understands and agrees, however, that if respondent ever files  
10 an application for relicensure or reinstatement in the State of California, the Board shall  
11 treat it as a Petition for Reinstatement of a revoked license in effect at the time the Petition  
12 is filed. Information gathered in connection with Accusation No. 950-2015-000580 may  
13 be considered by the Physician Assistant Board in determining whether or not to grant the  
14 Petition for Reinstatement. For the purposes of the reinstatement hearing and/or  
15 consideration by the Physician Assistant Board, the allegations in Accusation No. 950-  
16 2015-000580 shall be deemed to be admitted by respondent, and respondent waives any  
17 and all defenses based on a claim of laches or the statute of limitations.

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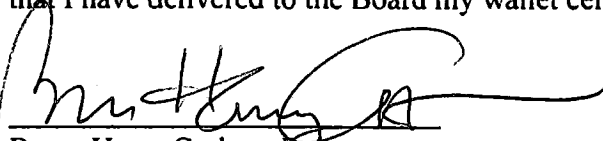
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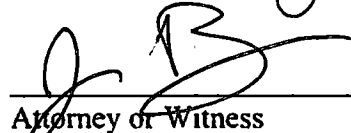
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ACCEPTANCE

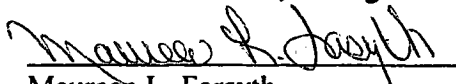
I, Bruce Harry Garbett, P.A., have carefully read the above Agreement and enter into it freely and voluntarily, with the optional advice of counsel, and with full knowledge of its force and effect, do hereby surrender Physician Assistant Certificate No. PA 11636, to the Physician Assistant Board of California for its acceptance. By signing this Agreement for Surrender of License, I recognize that upon its formal acceptance by the Board, I will lose all rights and privileges to practice as a Physician Assistant in the State of California and that I have delivered to the Board my wallet certificate and wall license.

  
Bruce Harry Garbett, P.A.

12/26/17  
Date

  
Attorney or Witness  
John Bishop, Esq.

12/27/17  
Date

  
Maureen L. Forsyth  
Executive Officer  
Physician Assistant Board

1-2-18  
Date

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